

# SUPPORTING GOALS AND IDEALS OF NATIONAL ALCOHOL AND DRUG ADDICTION RECOVERY MONTH

Mrs. MORELLA. Mr. Speaker, I move to suspend the rules and agree to the concurrent resolution (H. Con. Res. 190) supporting the goals and ideals of National Alcohol and Drug Addiction Recovery Month.

The Clerk read as follows:

H. CON. RES. 190

Whereas 26,000,000 people in the United States are addicted to drugs or alcohol;

Whereas 85 percent of all crime in the United States is related to drug or alcohol addiction;

Whereas the taxpayers of the United States paid more than \$150,000,000,000 in drug-related criminal and medical costs in 1997, which is more than they spent in that year on education, transportation, agriculture, energy, space exploration, and foreign aid combined;

Whereas each dollar invested in drug and alcohol treatment yields 7 dollars in savings from decreased health care costs, criminal justice costs, and work-related costs caused by absenteeism, injuries, and poor performance;

Whereas treatment for addiction is as effective as treatments for other chronic medical conditions, such as diabetes and high blood pressure;

Whereas adolescents who receive treatment for addiction report using less marijuana and alcohol and being involved in less criminal activity;

Whereas addiction treatment for adolescents also improves the school performance and psychological health of the adolescents;

Whereas a number of organizations and individuals dedicated to fighting addiction and promoting treatment and recovery will recognize September 2001 as National Alcohol and Drug Addiction Recovery Month;

Whereas the Center for Substance Abuse Treatment of the Substance Abuse and Mental Health Services Administration sponsors the celebration of National Alcohol and Drug Addiction Recovery Month to encourage citizen action to help expand and improve the availability of effective addiction treatment;

Whereas National Alcohol and Drug Addiction Recovery Month celebrates the tremendous achievements of individuals who have undergone successful addiction treatment and recognizes those in the field of addiction treatment who have dedicated their lives to helping people recover from addiction; and

Whereas the 2001 national campaign for National Alcohol and Drug Addiction Recovery Month embraces the theme of "We Recover Together: Family, Friends and Community" and seeks to increase awareness about alcohol and drug addiction and promote treatment and recovery for the millions of Americans who need it: Now, therefore, be it

*Resolved by the House of Representatives (the Senate concurring), That Congress supports the goals and ideas of National Alcohol and Drug Addiction Recovery Month.*

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Maryland (Mrs. MORELLA) and the gentleman from Texas (Mr. TURNER) each will control 20 minutes.

The Chair recognizes the gentlewoman from Maryland (Mrs. MORELLA).

GENERAL LEAVE

Mrs. MORELLA. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within

which to revise and extend their remarks on H.Con.Res. 190, the concurrent resolution now under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Maryland?

There was no objection.

Mrs. MORELLA. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I am pleased to have the House consider House Concurrent Resolution 190. It is important legislation introduced by our distinguished colleague, the gentleman from Minnesota (Mr. RAMSTAD). The resolution expresses congressional support for the goals and ideals of National Alcohol and Drug Addiction Recovery Month.

Mr. Speaker, over 26 million people in the United States are addicted to drugs or alcohol, and over 85 percent of all crimes are related to these two substances.

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In fact, the preamble to the resolution notes that in 1997 American taxpayers spent more than \$150 billion in drug-related criminal and medical costs. This is more than taxpayers spent that year on education, transportation, agriculture, energy, space exploration and foreign aid combined.

National Alcohol and Drug Addiction Recovery Month celebrates the tremendous achievements of individuals who have undergone successful addiction treatment. It also recognizes the tireless advocates who have dedicated their lives to helping people recover from addiction.

Treatment for addiction, which the resolution notes is as effective for treatment of other chronic medical conditions, such as diabetes and high blood pressure, deserve the support of all Americans.

Every dollar invested in drug and alcohol treatment yields \$7 in savings as a result of decreased health care costs, criminal justice costs, work-related costs caused by absenteeism, injuries, and poor performance. Treatment for adolescents improves their school performance and psychological health.

A number of organizations and individuals involved in fighting addiction will recognize September as National Alcohol and Drug Addiction Recovery Month. The Substance Abuse and Mental Health Services Administration's Center for Substance Abuse has recognized the importance of this activity. It sponsors this celebration to encourage citizen action to help expand and improve the availability of effective treatment for addiction.

The theme of this year's national campaign for National Alcohol and Drug Addiction Recovery Month is, and I quote, "We recover together: Family, friends and community."

Its objectives are to increase awareness and to promote treatment and recovery for the millions of Americans who need it. These are worthy goals, Mr. Speaker. I urge all Members to support the resolution.

Mr. Speaker, I reserve the balance of my time.

Mr. TURNER. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I rise in support of H. Con. Res. 190, which expresses the support of the goals and ideas of National Alcohol and Drug Recovery Month.

This resolution is one that is very close to the heart of its sponsor, Mr. RAMSTAD, who I have heard speak on this floor before regarding his personal experiences and his deep conviction that drug treatment is critical to our society.

September is, of course, National Alcohol and Drug Addiction Recovery Month. It is an opportunity for us to share the powerful message that substance abuse treatment is effective and it reclaims lives. Providing effective treatment to those who need it is critical to breaking the cycle of drug addiction, violence, and despair and to helping addicted individuals to become productive members of our society.

September is the opportunity for all of us to recognize the tremendous strides taken by individuals who have undergone successful treatment and to salute those in the field who have dedicated their lives to helping people in need.

Substance abuse problems costs American businesses and industries millions of dollars every year. They have profound negative effects in the workplace. A study by the Substance Abuse and Mental Health Services Administration found that nearly 73 percent of all illegal drug users in the United States are employed, 6.7 million full time workers, 1.6 million part time workers.

Lost productivity, high employee turnover, low employee morale, mistakes and accidents, and increased workers' compensation insurance and health insurance premiums are all the results of untreated substance abuse problems in the workplace.

Recovery Month also highlights the benefits to be gained from corporate and small business workplace substance abuse referral programs.

H. Con. Res. 190 makes us aware that recovery from substance abuse is possible and that supporting treatment for addicted individuals increases productivity, improves morale, business success, and the quality of life for the addicted individual and their families.

Mr. Speaker, I reserve the balance of my time.

Mrs. MORELLA. Mr. Speaker, I yield such time as he may consume to the gentleman from Minnesota (Mr. RAMSTAD).

Mr. RAMSTAD. Mr. Speaker, I thank the gentlewoman for yielding time to me and for bringing this resolution to the floor so expediently and for her strong support of this resolution. I thank the gentleman from Texas (Mr. TURNER) for his support of this resolution as well as his kind words.

Mr. Speaker, 20 years ago tomorrow, July 31, 1981, I woke up from my last

alcoholic blackout in a jail cell in Sioux Falls, South Dakota under arrest for disorderly conduct, resisting arrest and failure to vacate the premises. Today, on the eve of my twentieth anniversary as a grateful recovering alcoholic, I am alive and sober only because I had access to chemical dependency treatment.

My treatment experience at St. Mary's Hospital in Minneapolis, Minnesota started me on the road to recovery and gave me the tools to live a sober, healthy life these past 20 years.

But, Mr. Speaker, 26 million other Americans are not so fortunate. That is right. There are 26 million Americans, 26 million alcoholics and addicts in our country, and fewer than 5 percent of them are able to access treatment for their disease of addiction.

This disease, Mr. Speaker, is afflicting people of all ages. Among young people, teenagers, ages 12 to 17, an estimated 1.1 million young people are dependent on illicit drugs. Another 1 million teenagers are addicted to alcohol in this country. Last year alone, 3½ million drug addicts were denied access to treatment, according to the Office of National Drug Control Policy. That does not account for the staggering number of alcoholics who are unable to access treatment in the United States.

Alcoholism and other drug addictions are an epidemic in America that are not being adequately treated, an epidemic, Mr. Speaker, that killed 150,000 American people last year alone, and cost the American people \$246 billion. That is according to the Family Research Council, which we all respect for the accuracy of their studies.

Mr. Speaker, back in 1956, the American Medical Association first declared that addiction is a disease. AMA declared alcoholism and drug addiction are a fatal disease if not treated. That means we alcoholics and addicts will ultimately die, either directly or indirectly, as a result of our dependency if our disease is not treated and recovery maintained.

The good news is that treatment works. According to all of the studies, treatment for alcoholism and other chemical addiction has the same recovery rate as for the disease of diabetes, the disease of hypertension, and the disease of adult asthma. In fact, treatment for addiction has a higher success rate than treatment for kidney disease and many forms of cancer.

All of us in Congress have heard former drug czar Barry McCaffrey tell us, "Chemical dependency treatment is more effective than cancer treatment, and it is a lot cheaper." It is well-documented, as the two previous speakers have mentioned, every dollar we spend for treatment saves \$7 in health care costs, criminal justice costs, lost productivity from job absenteeism, injuries and below par work performance.

All of the empirical data also shows that health care costs alone are 100 percent higher for untreated addicts and alcoholics than for people like me

who have been fortunate enough to go through treatment for chemical dependency. Chemical dependency treatment works and it is cost effective. Treatment not only saved my life, but it has saved millions of lives in the United States over the last several decades, restoring people to sanity and enabling them to lead healthy, productive lives.

I urge my colleagues to support this resolution commemorating National Alcohol and Drug Addicting Recovery Month. For years a number of organizations and people dedicated to addiction treatment and recovery have recognized September as National Alcohol and Drug Addiction Recovery Month. I particularly want to recognize the Center for Substance Abuse Treatment of the Substance Abuse and Mental Health Services Administration, which sponsors this celebration of National Alcohol and Drug Addiction Recovery Month each year.

There are many other important organizations, like the Alliance Project, the Johnson Institute, Hazelden Foundation and Recovery Works in my home State of Minnesota which do so much to encourage citizen action to help expand and improve the availability of effective addiction treatment.

This September, special attention will focus on the relationships impacted by addiction and recovery. The theme, as was mentioned, will be "We recover together: Family, friends and community." As any recovering person will tell you addiction is extremely destructive to family members. That is why they call it the family disease, and the support of our family and friends is invaluable as we travel the road to recovery.

Addiction is also destructive to communities. Eighty-two percent of the people locked up in American jails and prisons today are there because of drugs and/or alcohol. Increasing access to treatment for use, Mr. Speaker, is extremely critical. Despite the benefits of treatment, a significant gap exists between the number of adolescents who need chemical dependency treatment and those who actually receive such treatment.

According to a study done in Minnesota, a State that has led the Nation in treatment and prevention of addiction, only one-fourth, one out of four young people hooked on drugs and/or alcohol who need treatment actually receive it.

Celebrating Recovery Month also gives us an opportunity to recognize the tremendous strides taken by those who have undergone treatment, as well as the great accomplishments by professionals in the treatment field who dedicate their lives to helping others. By celebrating recovery, we celebrate the lives of millions of people and their families and friends in recovery today.

We also, Mr. Speaker, give hope to those still suffering from the ravages of chemical addiction. I urge all of my

colleagues to support this important resolution, H. Con. Res. 190.

Mrs. MORELLA. Mr. Speaker, I reserve the balance of my time.

Mr. TURNER. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I commend the gentleman from Minnesota for sponsoring this resolution; and in particular, I know I am joined by every Member of this House in thanking him for standing on the floor and sharing with us his own personal experiences with this issue. I know it will be an inspiration to many who are struggling with this problem, and I join with my colleagues in thanking the gentleman to share his story and sponsor this resolution.

Mr. Speaker, I have no further requests for time, and I yield back the balance of my time.

Mrs. MORELLA. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I thank the gentleman from Minnesota (Mr. RAMSTAD) for his moving and inspiring statement, especially about his personal experiences. I also commend the gentleman for his 20th anniversary of freedom from chemical dependency, and thank him for introducing this resolution.

Mr. Speaker, I also want to commend the gentleman from Indiana (Mr. BURTON), the chairman of the Committee on Government Reform; the gentleman from Florida (Mr. SCARBOROUGH), chairman of the Subcommittee on Civil Service; the gentleman from California (Mr. WAXMAN), the ranking member of the full committee; and the gentleman from Illinois (Mr. DAVIS), the ranking member of the subcommittee, for expediting consideration of this important resolution.

Mr. Speaker, I urge all Members to support National Alcohol and Drug Addiction Recovery Month to encourage citizen action to help expand and improve the availability of effective treatment.

Mr. GILMAN. Mr. Speaker, I rise today in support of H. Con. Res. 190. By Mr. RAMSTAD a resolution supporting the goals and ideals of National Alcohol and Drug Addiction Recovery Month. I urge my colleagues to join in supporting this worthy legislation.

Regrettably Mr. Speaker, our society is in dire need of additional emphasis on alcohol and drug abuse education, and especially with regard to treatment. Alcohol is the third leading cause of preventable death in the nation, killing nearly 100,000 Americans each year. It has been estimated that approximately 14 million Americans suffer from alcohol related problems, including more than 8 million who are full alcoholics.

Drug abuse is a widespread problem affecting more than 9 million individuals. Recent years have shown disturbing trends in the use of heroin, various club drugs, and methamphetamine, especially among our younger populations. Moreover, the drugs available on the streets today are cheaper, purer and easier to acquire than at any previous point in our nation's history.

All told, it is estimated that 85% of all crime committed in our nation is somehow related to either drug or alcohol addiction. Furthermore,

in 1997, U.S. taxpayers spent more than \$150 billion in drug-related criminal and health care costs.

More troubling than the detrimental health effects for the individual alcoholic or addict, is the long term impact on the families, and especially the children, of alcoholics and drug abusers. Far too many children grow up in homes where one or both parents consume far too much alcohol, or use illicit drugs. These children are more likely to suffer abuse or neglect from their parents than their counterparts in homes where neither parent has a substance abuse problem. More troubling is the fact that these children have a higher risk of becoming alcoholics or addicts themselves when they reach adulthood.

We have made enormous progress in improving drug and alcohol awareness. Thanks to the tireless efforts of groups like the Alcoholism and Drug Abuse Council of Orange County, and of Mothers Against Drunk Driving, alcohol-related traffic fatalities have decreased considerably from thirty years ago.

Yet, we still have far to go. Far too many people do not view alcohol as a drug, and an alarming number of Americans do not realize that various alcoholic beverages contain different amounts of alcohol. A survey conducted in 1996 found that only 39% of Americans understood that a 12 ounce can of beer, a 5 ounce glass of wine, and a mixed drink with 1.5 ounces of distilled spirits contain the same amount of alcohol. This figure needs to be improved if we are to have any measurable level of success in raising alcohol awareness.

Moreover we also have far to go on the drug front as well. Recent years have seen a proliferation of efforts to create back doors to legalization. This phenomenon is best illustrated by the medical marijuana argument. However, on the whole, anti-drug efforts are seeing signs of finally working after eight years of neglect under the prior administration. A return to a balanced approach that attacks both the supply and demand side of the problem simultaneously has made a difference.

Drug treatment is an important component of demand reduction that has proven itself to be workable, but it requires enormous commitment on the part of both doctor and patient. This is especially true for those addicted to opiate narcotics and alcohol.

In closing Mr. Speaker, H. Con. Res. 190 is a good bill, with a laudable purpose. For that reason, I strongly support its passage, and urge my colleagues to do the same.

Mrs. MORELLA. Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore (Mr. PETRI). The question is on the motion offered by the gentlewoman from Maryland (Mrs. MORELLA) that the House suspend the rules and agree to the concurrent resolution, H. Con. Res. 190.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds of those present have voted in the affirmative.

Mrs. MORELLA. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

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# DISTRICT OF COLUMBIA COLLEGE ACCESS ACT TECHNICAL CORRECTIONS ACT OF 2001

Mrs. MORELLA. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1499) to amend the District of Columbia College Access Act of 1999 to permit individuals who graduated from a secondary school prior to 1998 and individuals who enroll in an institution of higher education more than 3 years after graduating from a secondary school to participate in the tuition assistance programs under such Act, and for other purposes.

The Clerk read as follows:

H.R. 1499

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

## SECTION 1. SHORT TITLE.

This Act may be cited as the "District of Columbia College Access Act Technical Corrections Act of 2001".

## SEC. 2. REVISIONS TO ELIGIBILITY REQUIREMENTS FOR TUITION ASSISTANCE UNDER DISTRICT OF COLUMBIA COLLEGE ACCESS ACT.

(a) PERMITTING CERTAIN INDIVIDUALS TO PARTICIPATE IN TUITION ASSISTANCE PROGRAM.—

(1) INDIVIDUALS GRADUATING FROM SECONDARY SCHOOL PRIOR TO 1998.—Section 3(c)(2)(B) of the District of Columbia College Access Act of 1999 (Public Law 106-98; 113 Stat. 1325) is amended by striking "on or after January 1, 1998".

(2) INDIVIDUALS ENROLLING MORE THAN 3 YEARS AFTER GRADUATING FROM SECONDARY SCHOOL.—Section 3(c)(2) of such Act (Public Law 106-98; 113 Stat. 1325) is amended by striking subparagraph (C).

(b) PROHIBITING PARTICIPATION OF FOREIGN NATIONALS.—Section 3(c)(2) of such Act (Public Law 106-98; 113 Stat. 1325), as amended by subsection (a)(2), is amended by inserting after subparagraph (B) the following:

"(C) meets the citizenship and immigration status requirements described in section 484(a)(5) of the Higher Education Act of 1965 (20 U.S.C. 1091(a)(5));".

## SEC. 3. EFFECTIVE DATE.

The amendments made by this Act shall take effect on the date of the enactment of this Act.

The SPEAKER pro tempore (Mr. PETRI). Pursuant to the rule, the gentlewoman from Maryland (Mrs. MORELLA) and the gentlewoman from the District of Columbia (Ms. NORTON) each will control 20 minutes.

The Chair recognizes the gentlewoman from Maryland (Mrs. MORELLA).

## GENERAL LEAVE

Mrs. MORELLA. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks on this legislation.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Maryland?

There was no objection.

Mrs. MORELLA. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, the gentlewoman from the District of Columbia (Ms. NORTON) introduced H.R. 1499 on April 4, 2001. The gentleman from Virginia (Mr. TOM

DAVIS) and I were original cosponsors of the legislation. I want to thank the gentlewoman from the District of Columbia for her diligent work and commitment to the students of the District of Columbia both during the 1999 passage of the District of Columbia College Access Act and in the introduction of the bill before us. H.R. 1499 makes amendments to the District of Columbia's tuition assistance grant program that was authorized by the passage of the District of Columbia College Access Act.

The legislation under consideration would permit District of Columbia residents who graduated from secondary school prior to 1998, and also those who enroll in an institution of higher education more than 3 years after graduating from a secondary school, to participate in the tuition assistance program. The original act limited participation to those students who graduated from secondary school after January 1, 1998. This amendment would allow current college juniors and seniors to be eligible to receive the benefits of the College Access Act. Because the original 1999 act was passed with enough funding for the current juniors and seniors to participate in the program, there is sufficient money for this group of students to benefit from the provision.

The legislation removes the 3-year deadline for college admission after graduation from high school to be eligible for the program. This restriction prevented individuals who needed to work before entering a college program, or who had other plans, from participating. The amendment follows the policy that the U.S. Department of Education places on its scholarship program.

Finally, H.R. 1499 closes the loophole that permitted foreign nationals who live in the District of Columbia to receive grants through this program. The legislation requires that individuals meet the citizenship and immigration status requirement of the Higher Education Act of 1965.

Mr. Speaker, H.R. 1499 is an extremely important bill for the students of the District of Columbia and the citizens of our Nation's capital. As a matter of fairness, these students should have the same educational opportunities as students in our 50 States. Colleges and universities will commence their educational year in a month. I urge swift passage of this bill so that the other body can also act on H.R. 1499 expeditiously, enabling more District citizens to receive a high-quality, affordable college education.

In its 2-year existence, the District of Columbia tuition access program has helped 1,800 people pay for their higher education. We look forward to many more taking advantage of this wonderful opportunity.

Mr. Speaker, the people who will participate in this program to obtain higher education will become wage earners, taxpayers, productive members of our